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APPLICANTS

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**** CONTINUING DATA** ***** HP

**** FOREIGN APPLICATIONS** ***** HP

IF REQUIRED, FOREIGN FILING LICENSE**GRANTED** ** 03/15/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CO	SHEETS DRAWING 5	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance	HP Initials			
Verified and Acknowledged Examiner's Signature				

ADDRESS

Elsa Keller
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 186 Wood Avenue South
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TITLE

Method and system for providing data applications for a mobile device

FILING FEE RECEIVED 1018	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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